

SPECIAL ACCESS PROGRAM SECURITY TERMINATION BRIEFING

For use of this form, see AR 380-381; the proponent agency is OCSA

DATA REQUIRED BY THE PRIVACY ACT OF 1974

Authority	Title 10, USC 3013.
Principal Purpose	Obtain accountability information for termination of access to this SAP.
Routine Uses	To brief individual that SAP access has terminated.
Disclosure	Disclosure is voluntary.

I, the undersigned, fully realize the importance to the National Security of the requirement for the safeguarding of classified defense information. In the fulfillment of this obligation, I certify that:

a. I understand the appropriate provisions of the espionage laws and Federal Criminal Statutes applicable to the safeguarding of classified defense information or material.

b. I have been advised that direct or indirect unauthorized disclosure, unauthorized retention, or negligent handling of the designated information by me could cause irreparable injury to the United States and be used to advantage by a foreign nation.

c. I have surrendered and no longer have in my possession, custody, or control any information or material concerning the below program.

d. I shall not communicate or transmit any classified defense information concerning the below program, orally or in writing, to any unauthorized person or agency.

e. I shall report to my Program Security (OPSEC) Manager, a local Federal Bureau of Investigation office, or an authorized official without delay, any incident wherein an attempt is made by an unauthorized person to solicit information concerning this subject.

f. I have received an oral debriefing on:

(Nickname or Codeword)

WITNESS:

(Signature)

(Signature)

(Date)

(Date)

(Printed Name)

(Printed Name)

(Position/Organization)

(Organization/Telephone Number/Position)

(SSN)